PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

108 29333

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS					· · · ·		1	RATE	T ccc	טא ד			
			22		<u> </u>				FEE	┨	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			<i>≨2</i> minus 20=		* 2			X\$ 9=	18	OR	X\$18=		
INDEPENDENT CLAIMS			/~ minus 3 =		0			X43=		OR	X86=		
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT		•			+145=		OR	+290=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			•	TOTAL	403	OR	TOTAL			
	С	LAIMS AS A	MENDED) - PART II				/			OTHER THAN		
		(Column 1)	(Column			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	skrik		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		-		X43=		OR	X86=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=-		OR	+290=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)											ADDII. 1 EE 1		
AMENDMENT B		CLAIMS REMAINING		HIGHE NUME	EST	PRESENT] [ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIO PAID F		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	•	
	Independent	*	Minus	***		=		X43=		OR	X86=		
1	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=		
		L	ŢOTAL			TOTAL	•						
ADDIT. FEE ADD											ADDIT. FEE	· ·	
	\	(Column 1) CLAIMS		(Colum		(Column 3)		· .				4001	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	IER .	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	A	=		X43=			X86=		
^	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X.10-		OR	7.00-		
. 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
**	f the "Highest Nur	nber Previously Pa mber Previously Pa	id For IN THIS	SPACE is	less than	20, enter "20."	. AI	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE		
		ber Previously Paid					r foun	d in the app	ropriate box	in colu	ımn 1.		